Fill in this information to identify your case:		
United States Bankruptcy Court for the :		
NORTHERN District ofILLINOIS(State)		
Case Number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Y 0	our full name		
	rite the name that is on your	Patricia	
	overnment-issued picture entification (for example,	First name	First name
yo	ur driver's license or	Lynn	-
pa	issport).	Middle name	Middle name
Br	ing your picture	Sanders Last name	last some
ide	entification to your meeting th the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
	ll other names you	Patricia	
	ave used in the last 8	First name	First name
ye	ears	Lynn	
Inc	clude your married or	Middle name	Middle name
	aiden names.	Sanders	
		Last name	Last name
		Patricia	
		First name	First name
		Lynn	
		Middle name	Middle name
		Woodroffe	
		Last name	Last name
3. O I	nly the last 4 digits of	NAV NOV 0227	NAVY NOV
-	our Social Security Imber or federal	xxx - xx - <u>9227</u>	XXX - XX
Inc	dividual Taxpayer entification number	OR	OR
100	enuncation number	9 xx - xx	9 xx - xx

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Document Sanders Patricia Lynn Debtor 1 Case Number (if known) _

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	Business name Business name EIN EIN	I have not used any business names or EINs. Business name Business name EIN EIN
5. Where you live	5401 N Nordica Ave Number Street	If Debtor 2 lives at a different address: Number Street
	Chicago IL 60656 City State ZIP Code COOK County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	City State ZIP Code County If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address.
	P.O. Box City State ZIP Code	P.O. Box City State ZIP Code
6. Why you are choosing this district to file for bankruptcy.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. have another reason. Explain. (See 28 U.S.C. § 1408	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408

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Debtor 1

Patricia Lynn Document Sanders

Page 3 of 67 Case Number (if known)

Pa	Tell the Court About Your	Bankruptcy	Case				
7.	The chapter of the Bankruptcy Code you are choosing to file under		Bankrup ter 7 ter 11 ter 12	•		Required by 11 U.S.C. § 342(b) for Individuals page 1 and check the appropriate box.	
8.	How you will pay the fee	local yours subm with: I nee Appli I requ By la less to	court for self, you itting you itting you a pre-pid to pacation to uest that w, a judhan 15 he fee i	or more details about may pay with case our payment on your inted address. If the fee in install for Individuals to First the fee be waive align may, but is no 10% of the official properties.	but how you may perh, cashier's check bur behalf, your at liments. If you cho bear The Filing Fee d (You may reque to required to, waive poverty line that ap	a. Please check with the clerk's office in your pay. Typically, if you are paying the fee ck, or money order. If your attorney is attorney may pay with a credit card or check goose this option, sign and attach the re in Installments (Official Form 103A). Lest this option only if you are filing for Chapter 7. live your fee, and may do so only if your income is applies to your family size and you are unable to option, you must fill out the Application to Have the 3B) and file it with your petition.	
9.	Have you filed for bankruptcy within the last 8 years?	■ No	District	None	When	Case Number MM / DD / YYYY Case Number MM / DD / YYYY Case Number MM / DD / YYYY	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate?	■ No	District		When	Relationship to you Case Number, if known MM / DD / YYYY Relationship to you Case Number, if known MM / DD / YYYY	
11.	Do you rent your residence?	■ No. □ Yes.		our landlord obtained		ent against you? Eviction Judgment Against You (Form 101A) and file it with	

Debtor 1	Patricia	Lvnn	Document Sanders	Page 4 of 67 Case Number (if known)	Desc Main
200101	First Name	Middle Name	Last Name		

Pa	Report About Any Busine	esses You Owi	rn as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No. □ Yes.	Go to Part 4. Name and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as		Name of business, if any	
	a corporation, partnerhsip, or LLC. If you have more than one sole proprietorship, use a		Number Street	
	separate sheed and attach it to this petition.			
			City State Zip Code	
			Check the appropriate box to describe your business:	
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))	
			Commodity Broker (as defined in 11 U.S.C. § 101(6))	
			☐ None of the above	
	debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	☐ No. I	I am not filing under Chapter 11. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Pa	rt 4: Report if You Own or Hav	ve Any Hazard	dous Property or Any Property That Needs Immediate Attention	
14.	Do you own or have any	No.		
	property that poses or is alleged to pose a threat of imminent and indentifiable hazard to	Yes.	What is the hazard?	_
	public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock		If immediate attention is needed, why is it needed?	_
	that must be fed, or a building that needs urgent repairs?		Where is the property?	
			Number Street	_
			City State ZIP Code	

Debtor 1

Patricia Lynn Document Sanders

Page 5 of 67

Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Ahout	Debtor	1.	

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing ab	ou
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing abou	ιt
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-08352 Entered 03/22/18 16:04:43 Desc Main Filed 03/22/18 Doc 1

Document Sanders Page 6 of 67 Patricia Lynn Debtor 1 Case Number (if known)

	What bind of deleter de	16a. Are your debts primarily	consumer debts? Consumer debts are de	fined in 11 U.S.C. § 101(8)
6.	What kind of debts do you have?	as "incurred by an individual	primarily for a personal, family, or household	purpose."
	•	No. Go to line 16b. Yes. Go to line 17.		
			business debts? Business debts are debts strengther through the operation of the busine	
		No. Go to line 16c. Yes. Go to line 17.		
		_	we that are not consumer debts or business of	dehts
			we that the flot consumer debts of business t	
7.	Are you filing under Chapter 7?	No. I am not filing under Ch	napter 7. Go to line 18.	
	•		er 7. Do you estimate that after any exempt p	
	Do you estimate that after any exempt property is	administrative expense	s are paid that funds will be available to distril	bute to unsecured creditors?
	excluded and	■No.		
	administrative expenses are paid that funds will be	Yes.		
	available for distribution to unsecured creditors?			
3.	How many creditors do	1-49	1,000-5,000	25,001-50,000
	you estimate that you owe?	☐ 50-99	5,001-10,000	50,001-100,000
	owe:	☐ 100-199 ☐ 200-999	☐ 10,001-25,000	☐ More than 100,000
9.	How much do you	\$0-\$50,000	\$1,000,001-\$10 million	□\$500,000,001-\$1 billion
	estimate your assets to	\$50,001-\$100,000	\$10,000,001-\$50 million	\$1,000,000,001-\$10 billion
	be worth?	\$100,001-\$500,000 \$500,001-\$1 million	☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million	☐\$10,000,000,001-\$50 billion ☐More than \$50 billion
0.	How much do you	\$0-\$50,000	□ \$1,000,001-\$10 million	□\$500,000,001-\$1 billion
	estimate your liabilities	\$50,001-\$100,000	□ \$10,000,001-\$50 million	\$1,000,000,001-\$10 billion
	to be?	\$100,001-\$500,000	\$50,000,001-\$100 million	☐ \$10,000,000,001-\$50 billion
		□ \$500,001-\$1 million	\$100,000,001-\$500 million	☐ More than \$50 billion
Pa	t 7: Sign Below			
or	you	I have examined this petition, and correct.	I declare under penalty of perjury that the info	rmation provided is true and
			ter 7, I am aware that I may proceed, if eligible nderstand the relief available under each chap	· · · · · · · · · · · · · · · · · · ·
			did not pay or agree to pay someone who is rd read the notice required by 11 U.S.C. § 342	
		I request relief in accordance with	the chapter of title 11, United States Code, sp	ecified in this petition.
		9	nent, concealing property, or obtaining money in fines up to \$250,000, or imprisonment for u d 3571.	
		🗶 /s/ Patricia Lynn Sand		
		Signature of Debtor 1	Signa	ture of Debtor 2
		Executed on03/19/2018	} Fxeci	uted on
		MM / DD		MM / DD / YYYY

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Debtor 1	Patricia	Lynn	Sanders	Case Number (if known)
	First Name	Middle Name	Last Name	

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

🗶 /s/ Wylie W Mok	Date	Date:	03/22/2018
Signature of Attorney for Debtor	-	MM / DE	O / YYYY
Wylie W Mok			
Printed name			
Geraci Law L.L.C.			
Firm name			
55 E. Monroe St., #3400			
Number Street			
Tunibor Stroot			
Chicago	IL	60603	3
	IL State		3 Code
Chicago	State	ZIP	
Chicago City	State	ZIP	Code

Fill in this information to identify your case:						
Debtor 1	Patricia	Lynn	Sanders			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State) Case Number						
(If known)			_			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Summarize Your Assets	
Part 11: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ 356,333
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 2,700
1c. Copy line 63, Total of all property on Schedule A/B	\$ 359,033
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$270,706
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$20,617
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$52,189
Community Van Liebillet	
Summarize Your Liabilities	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$4,067.32

Document Sanders Patricia Lynn Case Number (if known) _ Debtor 1 First Name Middle Name Last Name

Part 4:	Answer These Questions for Administrative and Statistical Records							
6. Are you	filing for bankruptcy under Chapter 7, 11 or 13?							
☐ No. ☐ Yes	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.■ Yes							
Your	 What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 							
8. From th Form 12	\$ 7,989.42							
	e following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> : Part 4 of Schedule E/F, copy the following:	Total claim						
1101111	art 4 or deficultie En , copy the following.	0.00						
9a. Dom	estic support obligations (Copy line 6a.)	\$_0.00						
9b. Taxe	es and certain other debts you owe the government. (Copy line 6b.)	\$_20,617.00						
9c. Clair	ns for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_0.00						
9d. Stud	ent loans. (Copy line 6f.)	\$_0.00						
•	gations arising out of a separation agreement or divorce that you did not report as laims. (Copy line 6g.)	\$_0.00						
9f. Debt	s to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$_0.00						
9g. Tota	I. Add lines 9a through 9f.	\$_20,617.00						

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Fill in this in	formation to ident	tify your case and this filing	g:	0 of 67		
Debtor 1	Patricia	Lynn	Sanders			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for	the : <u>NORTHERN</u> District	of <u>ILLINOIS</u> (State)		Objects if their in our	
Case Number (If known)	•				Check if this is an amended filing	
Official F	orm 106A/	 R			differided filling	
	<u>онн тоол (г</u> е А/В: Рго				1	2/15
			asset only once. If an asset f	its in more than one category, list t		
responsible for pages, write yo	supplying correct ur name and case	t information. If more space number (if known). Answe	is needed, attach a separate	rried people are filing together, bot e sheet to this form. On the top of a e an Interest In		
01. Do you ow	n or have any leg	al or equitable interest in a	ny residence, building, land,	or similar property?		
No.						
Yes.	Describe		What is the property? Check	all that apply.	to not deduct secured claims or examptions. But	
5401 N N	ordica		Single-family home	th	no not deduct secured claims or exemptions. Put ne amount of any secured claims on Schedule D:	
	ess, if available, or ot	her description	Duplex or multi-unit building	Ci	Creditors Who Have Claims Secured by Property	
			Condominium or cooperative		urrent value of the Current value of th	ne
			Manufactured or mobile hor	me en	itire property? portion you own?	
Chicago		IL 60656	Land	\$_	320,000.00 \$ 160,00	00.00
City		State ZIP Code	Investment property			
County			Timeshare Other		escribe the nature of your ownership	
County				the	terest (such as fee simple, tenancy by e entireties, or a life estat), if known.	
			Who has an interest in the p	roperty? Check one.		
			Debtor 1 only Debtor 2 only	_		
			Debtor 1 and Debtor 2 only		Check if this is a community property	
			At least one of the debtors		(see instructions)	
				to add about this item, such as loc	al	
			property identification number	oer:		
	-	-	ur entries fro Part 1, includinç	g any entries for pages 	>	
you mave a	auditor Fure II	Title that hamber here in			\$160,00	JU.UU
Part 2:	Describe Your Vehi	cles				
Do you own, le	ease, or have lega	l or equitable interest in an	y vehicles, whether they are	registered or not? Include any vehic	cles	
-	_	=	=	ecutory Contracts and Unexpired Lea		
	s, trucks, tractors,	sport utility vehicles, moto	orcycles			
No.	Dogoribo					
Yes. O4. Watercraft	Describe t, aircraft, motor h	omes, ATVs and other recr	eational vehicles, other vehic	cles, and accessories		
Examples:	Boats, trailers, motor	rs, personal watercraft, fishing ve	essels, snowmobiles, motorcycle a	ccessories		
Yes. 5. Add the dol	Describe lar value of the po	ortion you own for all of you	ır entries fro Part 2, including	a any entries for pages		
uio uoi	or the po	, ioi un oi yoi	are =, moraumg	,, pugoo	1	

Record # 757358 Page 1 of 6 Official Form 106A/B Schedule A/B: Property

you have attached for Part 2. Write that number here-----

\$ 0.00

Debtor 1

Case 18-08352 Patricia

Doc 1

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Desc Main

First Name Middle Name Filed 03/22/18

Document

Last Name

	Part 3:	Describe Your Pe	rsonal and Household Items		
Do	o you own o	r have any legal	or equitable interest in any of the following items?	Current value of to portion you own? Do not deduct secure or exemptions	
06		d goods and furr Major appliances, f	nishings furniture, linens, china, kitchenware		
	Yes.	Describe	Furniture, linens, large and small appliances, table & chairs, bedroom set \$1,500	\$	1,500.00
07.		Televisions and rad	dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games		
	Yes.	Describe	Flat screen TV, computer, printer, music collection, cell phone \$500	\$	500.00
08	stamp, coi	Antiques and figuri n, or baseball card o	nes; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles		
	Yes.	Describe		\$	0.00
09	Examples:	t for sports and Sports, photograph s; carpentry tools; m	nic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes		
	Yes.	Describe		\$	0.00
10.	Examples:	Pistols, rifles, shoto	guns, ammunition, and related equipment		
	Yes.	Describe		\$	0.00
11.	Examples:	Everyday clothes, f	furs, leather coats, designer wear, shoes, accessories		
	Yes.	Describe	Normal Clothing, Shoes, Accessories \$100	\$	100.00
12	Examples: gold, silve		costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	,	
	Yes.	Describe	Costume Jewelry, engagement ring \$500	\$	500.00
13.	. Non-farm Examples: No.	animals Dogs, cats, birds, h	norses	,	
	Yes.	Describe	Two Dogs \$0	\$	0.00
14	No.		usehold items you did not already list, including any health aids you did not list		
	Yes.	Describe		\$	0.00
15.			of your entries from Part 3, including any entries for pages you have attached		\$2,600.00
	ioi Fait 3.	vville triat mumb			

Debtor 1 Patricia

Case 18-08352

Filed 03/22/18
Sanders
Document
Last Name Doc 1

Entered 03/22/18 16:04:43 Page 12 of 67 umber (if known)

Desc Main

First Name Middle Name

P	art 4:	Describe Your Fi	nancial Assets	
		r have any legal	or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions
16.	Cash Examples:	Money you have i	n your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	Yes.	Describe		\$0.00
17.		Checking, savings	s, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, If you have multiple accounts with the same institution, list each.	
	Yes.	Describe	Account Type: Institution name: Checking Account Chase Bank	\$100.00
18.		-	bublicly traded stocks tment accounts with brokerage firms, money market accounts	\$ <u>100.0</u> 0
	Yes.	Describe	Institution or issuer name:	\$ <u> </u>
19.	Non-public No.	cly traded stock	and interests in incorporated and unincorporated businesses, including an interest in	
20	Yes.		Name of Entity and Percent of Ownership: te bonds and other negotiable and non-negotiable instruments	\$0.00
20.	Negotiable	instruments includ	le bersonal checks, cashiers' checks, promissory notes, and money orders. ire those you cannot transfer to someone by signing or delivering them.	
	Yes.	Describe	Issuer name:	\$0.00
21.		t or pension acc Interests in IRA, E	counts RISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	Yes.	Describe	Type of account and Institution name: 401(k) or similar plan Through Employer	\$Unknown \$0.00
22.	Your share		payments pasits you have made so that you may continue service or use from a company andlords, prepaid rent, public utilities (electric, gas, water), telecommunications	<u>\$</u>
	Yes.	Describe	Institution name or individual:	\$0.00
23.	Annuities No.	(A contract for a	a periodic payment of money to you, either for life or for a number of years)	
	Yes.	Describe	Issuer name and description:	\$0.00
24.			RA, in an account in a qualified ABLE program, or under a qualified state tuition program. (b), and 529(b)(1).	
	Yes.	Describe	Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):	\$0.00
25.	No.		interests in property (other than anything listed in line 1), and rights or powers	
26	Yes.	Describe	marks trade secrets and other intellectual assesses	\$0.00
∠ნ.			marks, trade secrets, and other intellectual property ames, websites, proceeds from royalties and licensing agreements	
	Yes.	Describe		\$0.00

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27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Yes Describe..... 0.00 Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions 28. Tax refunds owed to you Yes. Describe..... 0.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No. Describe..... 0.00 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No. Yes. Describe..... 0.00 31. Interest in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No. Company Name & Beneficiary: Yes. Describe..... Health Insurance and Disability Insurance Through Employer \$0 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No. Yes. Describe..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. Yes. Describe..... 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights No. Yes Describe..... 0.00 35. Any financial assets you did not already list No. Yes. Describe 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$100.00 for Part 4. Write that number here Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? Current value of the portion you own? Do not deduct secured claims or exemptions

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Sanders Page 14 of 67 Pumber (if known) Case 18-08352 Doc 1 Patricia Debtor 1

Desc Main

38. Accounts receivable or commissions you already earned No. Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe..... 0.00 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes Describe..... 0.00 41. Inventory No. Yes. Describe..... 0.00 42. Interests in partnerships or joint ventures No. Name of Entity and Percent of Ownership: Yes. Describe..... 0.00 43. Customer lists, mailing lists, or other compilations No. Yes. Describe..... 0.00 44. Any business-related property you did not already list No. Describe..... 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Yes. Describe..... 0.00 47. Farm animals Examples: Livestock, poultry, farm-raised fish No. Yes. Describe..... 0.00 48. Crops-either growing or harvested No. Yes. Describe..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Yes. Describe..... 0.00 50. Farm and fishing supplies, chemicals, and feed No. Describe..... Yes.

0.00

First Name Wildle Name	Last Maille	
51. Any farm- and commercial fishing-related property No.	y you did not already list	
Yes. Describe		\$0.00
52. Add the dollar value of all of your entries from Part for Part 6. Write that number here	t 6, including any entries for pages you have attached	> \$0.00
Describe All Property You Own or Have an I	Interest in That You Did Not List Above	
53. Do you have other property of any kind you did no Examples: Season tickets, country club membership No.	ot already list?	
Yes. Describe		\$0.00
54. Add the dollar value of all of your entries from Part	t 7. Write that number here	\$0.00
Part 8: List the Totals of Each Part of this Form		
55. Part 1: Total real estate, line 2		\$ 160,000.00
56. Part 2: Total vehicles, line 5	\$ 0.00	
57. Part 3: Total personal and household items, line 15	\$ 2,600.00	
58. Part 4: Total financial assets, line 36	\$ 100.00	
59. Part 5: Total business-related property, line 45	\$ 0.00	
60. Part 6: Total farm- and fishing-related property, line	e 52 \$ 0.00	
61. Part 7: Total other property not listed, line 54	\$ 0.00	
62. Total personal property. Add lines 56 through 61	\$ 2,700.00	\$ 2,700.00
63. Total of all property on Schedule A/B. Add line 55 +	+ line 62	\$162,700.00

Official Form 106A/B Record # 757358 Schedule A/B: Property Page 6 of 6

Fill in this in	Fill in this information to identify your case:						
Debtor 1	Patricia	Lynn	Sanders				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for t	he: <u>NORTHERN</u> District of _	ILLINOIS(State)				
Case Number	r						
(If known)							

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the	e Property You Claim as Exempt			
1. Which set of exemp	otions are you claiming? Check o	one only, even if your spo	use is filing with you.	
You are claiming	g state and federal nonbankruptcy	exemptions . 11 U.S.C. §	522(b)(3)	
You are claiming	g federal exemptions. 11 U.S.C. §	522(b)(2)		
2. For any property yo	ou list on Schedule A/B that you	claim as exempt, fill in tl	ne information below.	
Brief description of Schedule A/B that I	f the property and line on lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
	rniture, linens, large and small pliances, table & chairs, bedroom t	\$1,500	\$_1,500	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 06	3		100% of fair market value, up to any applicable statutory limit	
	at screen TV, computer, printer, usic collection, cell phone	\$_500	\$_500	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 07	7		100% of fair market value, up to any applicable statutory limit	
	ormal Clothing, Shoes,	\$ <u>100</u>	\$_100	735 ILCS 5/12-1001(a),(e)
Line from Schedule A/B: 1	1		100% of fair market value, up to any applicable statutory limit	
Brief Co	ostume Jewelry, engagement ring	\$_500	\$ _ 500	735 ILCS 5/12-1001(a),(e)
Line from Schedule A/B: 12	2		100% of fair market value, up to any applicable statutory limit	
Official Form 106C	Record # 757358	Schedule C: Ti	ne Property You Claim as Exempt	Page 1 of 2

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Patricia

Case 18-08352 Page 17 of 67 Case Number (if known) Document Lynn Debtor 1 Middle Name Last Name **Additional Page** Part 2: Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B Brief Checking Account, Chase Bank, 735 ILCS 5/12-1001(b) \$ 100 description: 100.00 \$ 100 Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit 735 ILCS 5/12-1006 Brief 401(k) or similar plan, Through Unknown description: Employer Line from 100% of fair market value, up to 21 any applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ Yes.

Fill in this in	Caso 19 formation to iden		oc 1 — Filod 03/22/1		d 03/22/18 16:0 of 67	4:43	Desc Main	
Debtor 1	Patricia	Lynn	Sanders					
	First Name	Middle Name	e Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	e Last Name					
United States	Bankruptcy Court fo	r the : <u>NORTHERN</u>	_ District of _ <u>ILLINOIS</u>					
Case Number	-		(State)				Check if thi	s is an
(If known)							amended fi	ling
Official F	orm 106D							
Schedule	D: Credito	rs Who Have	e Claims Secured b	y Property				12/15
1. Do any cre No. Ch	ditors have claim neck this box and s	mation below.		s. You have nothin	ig else to report on this for	m.		
Part 1:	List All Secured Cl	aims ————————————————————————————————————			Osliman A	1	Oaksins A	0-10
for each cl	aim. If more than	one creditor has a p	an one secured claim, list the crearticular claim, list the other crearal order according to the credito	ditors in Part 2.	Column A Amount o Do not dec value of co	of claim duct the	Column A Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 US BAN	NK HOME Mortga	ge	Describe the property that s	ecures the claim:	\$ <u>270,70</u>	6.00	\$ <u>356,333.00</u>	\$ 0.00
Creditor's	Name		5401 N Nordica Chicago IL	60656 - Primary				
	rederica St		Residence					
Number	Street							
			As of the date you file, the c	laim is: Check all th	at apply.			
Owenst	ooro	KY 42301	Contingent					
City		State Zip Code	Unliquidated ☐Disputed					
Who owes	the debt? Check o	ne.	Nature of Lien. Check all that	annly				
Debtor		nc.	An agreement you made (si		ecured			
Debtor	•		car loan)	den de mongage or e	courcu			
=	1 and Debtor 2 only		Statutory lien (such as tax li	en. mechanic's lien)				
At least	one of the debtors a	and another	Judgment lien from a lawsu					
_			Other (including a right to of					
	if this claim relate: unity debt	s to a		4050				
Date Debt	was incurred		Last 4 digits of account num	nber1656_				
Part 2:	List Others to Be N	lotified for a Debt Tha	at You Already Listed					
trying to collect	t from you for a de	bt you owe to someo ebts that you listed in	out your bankruptcy for a debt th ne else, list the creditor in Part 1, Part 1, list the additional credito	and then list the c	ollection agency here. Sim	ilarly, if yοι	ı have more	

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 270,706.00

-:11	:41-	Caso 19 09252	Doc 1	Filed 02/22/19	red 03/22/18 16:04:43	} D	esc Main		
FIII	ın tr	nis information to identify your case	9:		9 of 67				
De	btor 1	Patricia L	.ynn	Sanders					
		First Name Mi	iddle Name	Last Name					
De	btor 2	<u></u>							
(Spi	ouse, if f	filing) First Name Mi	iddle Name	Last Name					
Un	ited S	States Bankruptcy Court for the : NORT	<u>HERN</u> Distri	ict of <u>ILLINOIS</u>					
0				(State)			☐Check if	this is an	
	known	umber i)					amended		
⊃ŧŧ:	منم	Form 106E/E			_			g	
וווע	<u>Cla</u>	<u> I Form 106E/F</u>							_
<u>ich</u>	edı	ule E/F: Creditors Who	Have l	Unsecured Claims				12/1	5
/B: F redite eede op of	<i>rope</i> ors w d, co	erty (Official Form 106A/B) and on S with partially secured claims that are	Schedule G: le listed in Son mber the enti and case num	ed leases that could result in a claim. A Executory Contracts and Unexpired Lochedule D: Creditors Who Have Claims ries in the boxes on the left. Attach the mber (if known).	eases (Official Form 106G). Do not in a Secured by Property. If more space	nclude e is	any		
									_
1. D	o any	y creditors have priority unsecured	claims agai	nst you?					
] No	o. Go to Part 2.							
	Ye	S.							
e: n: u:	ach c onpri nsecu	claim listed, identify what type of clair ority amounts. As much as possible, ured claims, fill out the Continuation	n it is. If a cla list the claim Page of Part	has more than one priority unsecured claim has both priority and nonpriority amous in alphabetical order according to the 1. If more than one creditor holds a partuctions for this form in the instruction boo	ounts, list that claim here and show be creditor's name. If you have more tha icular claim, list the other creditors in	oth prior an two p	rity and		
					Total clain	n	Priority amount	Nonpriority amount	
2.1	Illir	nois Department of Revenue	_ L	ast 4 digits of account number	\$_3,317.00)	\$ 3,317.00	\$ <u>0.00</u>	
		ditor's Name D Box 19044	v	When was the debt incurred? 201	7				
	Nur	mber Street	_						
			A	as of the date you file, the claim is: Check	all that apply.				
	0	win refined II COZO	[Contingent					
	City		4-9044 E	Unliquidated					
1		owes the debt? Check one.		Disputed					
	De	ebtor 1 only							
	∐D€	ebtor 2 only	Ţ	ype of PRIORITY unsecured claim:					
	∐D€	ebtor 1 and Debtor 2 only	L	Domestic support obligations					
	∐At	least one of the debtors and another		Taxes and certain other debts you owe the	government				
	_	heck if this claim relates to a	_	7					
		ommunity debt e claim subject to offest?	L	Claims for death or personal injury while yo	u were				
	No	•	_	intoxicated					
	Ye		L	Other. Specify	_				
									_

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Patricia Lynn
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2.2 IRS Priority Debt	Last 4 digits of account number	\$_7,500.00	\$ <u>7,500.00</u>	\$ <u>0.00</u>		
Creditor's Name	2017					
PO Box 7346	When was the debt incurred? 2017					
Number Street						
	As of the date you file, the claim is: Check all that apply.					
Philadelphia PA 19101	Contingent					
City State Zip Code	Unliquidated					
Who owes the debt? Check one.	Disputed					
Debtor 1 only						
Debtor 2 only	Type of PRIORITY unsecured claim:					
Debtor 1 and Debtor 2 only	Domestic support obligations					
At least one of the debtors and another	Taxes and certain other debts you owe the government					
	Taxes and certain other debts you owe the government					
Check if this claim relates to a						
community debt	Claims for death or personal injury while you were					
Is the claim subject to offest?	intoxicated					
No □	Other. Specify					
Yes 2 3 IRS Priority Debt		\$ 9,800.00	\$ 9,800.00	\$ 0.00		
2.0	Last 4 digits of account number	\$_3,000.00	\$ <u>9,000.00</u>	\$ 0.00		
Creditor's Name PO Box 7346	When was the debt incurred? 2016					
	when was the debt incurred?					
Number Street						
	As of the date you file, the claim is: Check all that apply.					
	Contingent					
Philadelphia PA 19101	Unliquidated					
City State Zip Code	Disputed					
Who owes the debt? Check one.	Dioputed					
Debtor 1 only						
Debtor 2 only	Type of PRIORITY unsecured claim:					
Debtor 1 and Debtor 2 only	Domestic support obligations					
At least one of the debtors and another	Taxes and certain other debts you owe the government					
Check if this claim relates to a						
community debt	Claims for death or personal injury while you were					
Is the claim subject to offest?	intoxicated					
No	Other. Specify					
Yes						
Part 2: List All of Your NONPRIORITY Unsecure	d Claims					
Part 2:						
3. Do any creditors have nonpriority unsecured cla	ims against you?					
No. You have nothing to report in this part. S	ubmit this form to the court with your other schedules.					
Yes.						
4. List all of your nonpriority unsecured claims in t	he alphabetical order of the creditor who holds each claim. If a	creditor has more than	one			
nonpriority unsecured claim, list the creditor separ	ately for each claim. For each claim listed, identify what type of clai	m it is. Do not list claim	ns already			
included in Part 1. If more than one creditor holds	a particular claim, list the other creditors in Part 3.If you have more	than three nonpriority	unsecured			
claims fill out the Continuation Page of Part 2.						

Total claim

Debtor 1	Patricia Lynn	Dacyment Pa	age 21 of 67	
	First Name Middle Name	Last Name		
4.1	CBNA	Last 4 digits of account number	NULL	\$ <u>850.00</u>
	Creditor's Name		2006-2017	
	Po Box 6283	When was the debt incurred?	2000-2017	
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
	a. a	Contingent		
	Sioux Falls SD 57117	Unliquidated		
v	City State Zip Code Vho owes the debt? Check one.	Disputed		
	Debtor 1 only			
1 7	Debtor 2 only	Type of NONPRIORITY unsecured c	laim:	
F	Debtor 1 and Debtor 2 only	Student loans	iaiii.	
	At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
	=	that you did not report as priority clai	-	
L	Check if this claim relates to a community debt	Debts to pension or profit-sharing pla		
ls	s the claim subject to offest?	bebts to pension of profit-straining pie	ans, and other similar debts	
	No	Other, Specify Credit Card or C	Credit Use	
[Yes	Other. Specify	- Control Cont	
4.2	Chase CARD	Last 4 digits of account number	NULL	\$ 0.00
	Creditor's Name		0040 0047	
	Po Box 15298	When was the debt incurred?	2013-2017	
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
		Contingent		
	Wilmington DE 19850	Unliquidated		
١,,,	City State Zip Code Vho owes the debt? Check one.	Disputed		
"				
	Debtor 1 only	- ()(0)(0)(0)(0)(0)		
	Debtor 2 only	Type of NONPRIORITY unsecured of	laim:	
-	Debtor 1 and Debtor 2 only	☐ Student loans		
	At least one of the debtors and another	Obligations arising out of a separation	-	
L	Check if this claim relates to a	that you did not report as priority clai		
1	community debt s the claim subject to offest?	Debts to pension or profit-sharing pla	ans, and other similar debts	
	No	Other Specify Credit Card or C	redit Llee	
1 7	Yes	Other. Specify Credit Card or C	neuit Ose	
4.3	Chase CARD	Last 4 digits of account number	NULL	\$ <u>3,655.00</u>
	Creditor's Name	<u> </u>		
	Po Box 15298	When was the debt incurred?	2014-2016	
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
		Contingent		
	Wilmington DE 19850	Unliquidated		
١.,	City State Zip Code	Disputed		
Y	/ho owes the debt? Check one. ■			
	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured of	laim:	
<u> </u>	Debtor 1 and Debtor 2 only	Student loans		
<u> </u>	At least one of the debtors and another	Obligations arising out of a separation	-	
[Check if this claim relates to a	that you did not report as priority clai		
,	community debt s the claim subject to offest?	Debts to pension or profit-sharing pla	ans, and other similar debts	
	No	Other, Specify Credit Card or C	redit l lea	
	Yes	Other. Specify Credit Card or C	Medit 036	

Official Form 106E/F

Case 18-08352 Doc 1 Filed 03/22/18 Entered 03/22/18 16:04:43 Desc Main Page 22 of 67 Case Number (if known) **Document** Patricia Lynn Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** Chase CARD \$ 4,240.00 Last 4 digits of account number _ Creditor's Name 2014-2016 Po Box 15298 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Wilmington DF 19850 Unliquidated City State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Yes Chase CARD NULL \$ 6,034.00 Last 4 digits of account number 4.5 Creditor's Name 2014-2016 Po Box 15298 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Wilmington 19850 DE Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only

Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify ___ Credit Card or Credit Use COMENITY BANK/Antylrmc NULL \$ 5,001.00 4.6 Last 4 digits of account number Creditor's Name 2015-2016 Po Box 182789 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Columbus OH 43218 Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? No Other. Specify ___Credit Card or Credit Use

Official Form 106E/F

		Case 18-08352	Doc 1	Filed 03/22/18	Entered 03/22/18 16:04:4	13 Desc Main		
Debtor 1	Patricia	Lynn		<u> </u>	Page 23 of 67 (If known)			
	First Name	Middle Name		Last Name				
Part 2:	Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page							
After listii	After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.							

fter listing any entries on this page, number	them beginning with 4.4, followed by 4.5, and so	forth.	Total Claim
4.7 COMENITY BANK/Atylrimc	Last 4 digits of account number N	ULL	\$ <u>7,197.00</u>
Creditor's Name Po Box 182789	When was the debt incurred?	013-2016	
Number Street	When was the dept incurred:		
	As of the data you file the claim is. Chas	all that apply	
	As of the date you file, the claim is: Chec	ж ан шасарру.	
Columbus OH 43218	Contingent		
City State Zip Co	Unliquidated		
Who owes the debt? Check one.	Disputed		
Debtor 1 only			
Debtor 2 only	Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only	Student loans		
At least one of the debtors and another	Obligations arising out of a separation agr	reement or divorce	
Check if this claim relates to a	that you did not report as priority claims		
community debt Is the claim subject to offest?	Debts to pension or profit-sharing plans, a	and other similar debts	
No	Canadit Cond on Canadi	41100	
Yes	Other. Specify Credit Card or Credit	USE	
1.8 COMENITY BANK/Carsons	Last 4 digits of account number N	ULL	\$ 3,358.00
Creditor's Name			
Po Box 182789	When was the debt incurred?	013-2016	
Number Street			
	As of the date you file, the claim is: Chec	ck all that apply.	
	Contingent		
Columbus OH 43218	B Unliquidated		
City State Zip Co	ode Disputed		
Who owes the debt? Check one.	Пореже		
Debtor 1 only			
Debtor 2 only	Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only	Student loans		
At least one of the debtors and another	Obligations arising out of a separation agi	reement or divorce	
Check if this claim relates to a	that you did not report as priority claims	and other similar debte	
community debt Is the claim subject to offest?	Debts to pension or profit-sharing plans, a	and other similar debts	
No	Other. Specify Credit Card or Credit	tlise	
Yes	Other. Specify State Sails St. St. Sails		
1.9 COMENITY BANK/PIER 1	Last 4 digits of account number N	ULL	\$ _2,029.00
Creditor's Name		0.40, 00.40	
Po Box 182789	When was the debt incurred?	013-2016	
Number Street			
	As of the date you file, the claim is: Chec	ck all that apply.	
	Contingent		
Columbus OH 43218	Unliquidated		
City State Zip Co Who owes the debt? Check one.	Disputed		
Debtor 1 only			
Debtor 2 only	Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only	Student loans		
At least one of the debtors and another	Obligations arising out of a separation agr	reement or divorce	
=	that you did not report as priority claims	SSS.R. OF GIVOIDS	
Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, a	and other similar debts	
Is the claim subject to offest?	Social to perision of profit-straining plans, a	and state. Offinial dobto	
No	Other. Specify Credit Card or Credit	t Use	
Yes			

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Case 18-08352 Page 24 of 67 Case Number (if known) **Document** Debtor 1 Patricia Lynn Your NONPRIORITY Unsecured Claims - Continuation Page

After lis	sting any entries on this page, number them be	eginning with 4.4, followed by 4.5, and	d so forth.	Total Claim
4.10	Comenitybk/Victoriasec	Last 4 digits of account number	NULL	\$ 1,979.00
	Creditor's Name		0040 0040	
	Po Box 182789	When was the debt incurred?	2010-2016	
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
	_	Contingent		
	Columbus OH 43218	Unliquidated		
, v	City State Zip Code /ho owes the debt? Check one.	Disputed		
ï	Debtor 1 only	—		
1 7	Debtor 2 only	Type of NONPRIORITY unsecured c	laim:	
7	Debtor 1 and Debtor 2 only	Student loans	ianii.	
	At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
1 1		that you did not report as priority clai		
-	Check if this claim relates to a community debt	Debts to pension or profit-sharing pla		
Is	the claim subject to offest?		2.10, and other ominal door	
	No	Other. Specify Credit Card or C	Credit Use	
	Yes			
4.11	Directv	Last 4 digits of account number	5637	<u>\$ 136.00</u>
	Creditor's Name		2017-2017	
	10550 Deerwood Park Blvd	When was the debt incurred?	2017-2017	
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
	Jackson III. 00050	Contingent		
	Jacksonville FL 32256	Unliquidated		
l v	City State Zip Code /ho owes the debt? Check one.	Disputed		
	Debtor 1 only			
ΙĒ	Debtor 2 only	Type of NONPRIORITY unsecured cl	laim:	
ΙĒ	Debtor 1 and Debtor 2 only	Student loans		
lī	At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
1 7	Check if this claim relates to a	that you did not report as priority clai	ims	
-	community debt	Debts to pension or profit-sharing pla	ans, and other similar debts	
Is	the claim subject to offest?			
	No	Other. Specify Collecting for Cr	reditor	
\vdash	Yes		0007	. 5 500 00
4.12	FORD CRED	Last 4 digits of account number	8227	\$ <u>5,500.00</u>
	Creditor's Name Po Box Box 542000	When was the debt incurred?	2013-2017	
		mion was the asst mounta.		
	Number Street			
		As of the date you file, the claim is:	Check all that apply.	
	Omaha NE 68154	Contingent		
	City State Zip Code	Unliquidated		
l v	/ho owes the debt? Check one.	Disputed		
	Debtor 1 only			
	Debtor 2 only	Type of NONPRIORITY unsecured co	laim:	
	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a separation	on agreement or divorce	
Ī	Check if this claim relates to a	that you did not report as priority clai	ims	
-	community debt	Debts to pension or profit-sharing pla	ans, and other similar debts	
Is	the claim subject to offest?	_		
	No	Other. Specify Deficiency, Repo	o'd/Surr'd Auto	
	Yes			

Page 25 of 67 Case Number (if known) **Document** Debtor 1 Patricia Lynn

Your NONPRIORITY Unsecured Claims - Continuation Page

Creditor's Name PO Box 2809 Number Street Monroe WI 53566 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Unliquidated Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card or Credit Use	Total Claim
Creditor's Name PO Box 2809 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Unliquidated Unliquidated Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Types Other. Specify Credit Card or Credit Use	175.00
Monroe City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes Manroe AND MAIN As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card or Credit Use	
Monroe City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes Manco AND MAIN As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card or Credit Use	
Monroe WI 53566 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes Monroe WI 53566 Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card or Credit Use	
Monroe WI 53566 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes Mearce AND MAIN	
City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims community debt Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Obligations arising plans, and other similar debts Other. Specify Credit Card or Credit Use	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card or Credit Use	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Other. Specify Credit Card or Credit Use	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Other. Specify Credit Card or Credit Use	
At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Other. Specify Credit Card or Credit Use	
Check if this claim relates to a community debt Is the claim subject to offest? No Other. SpecifyCredit Card or Credit Use	
community debt Is the claim subject to offest? No Other. SpecifyCredit Card or Credit Use Yes NO NO NO NO NO NO NO NO NO N	
Is the claim subject to offest? No Other. Specify Credit Card or Credit Use Yes No Specify Credit Card or Credit Use	
No Other. Specify Credit Card or Credit Use Yes NULL NULL NULL NULL NULL NULL NULL NU	
Yes NID MAIN	
4.14 Monroe AND MAIN Last 4 digits of account number NULL \$	
	252.00
Creditor's Name	
1112 7Th Ave When was the debt incurred? 2015-2017	
Number Street	
As of the date you file, the claim is: Check all that apply.	
Contingent	
Monroe WI 53566 Unliquidated	
City State Zip Code Who owes the debt? Check one. Disputed	
Debtor 1 only	
Debtor 2 only Type of NONPRIORITY unsecured claim:	
Check if this claim relates to a that you did not report as priority claims community debt Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offest?	
No Other. Specify Credit Card or Credit Use	
Yes	
	0.00
Creditor's Name	
PO Box 5138 When was the debt incurred?	
Number Street	
As of the date you file, the claim is: Check all that apply.	
Contingent	
Timonium MD 21094 Unliquidated	
City State Zip Code	
The Street are dept. Officer offic.	
Debtor 1 only	
Debtor 2 only Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only Student loans	
At least one of the debtors and another Obligations arising out of a separation agreement or divorce	
Check if this claim relates to a that you did not report as priority claims	
community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest?	
No Other. Specify Credit Card or Credit Use	
Yes Other. Specify Credit Card of Credit Use	

Page 26 of 67 Case Number (if known) **Document** Debtor 1 Patricia Lynn

Your NONPRIORITY Unsecured Claims - Continuation Page

After	listing any entries on this page, number them be	eginning with 4.4, followed by 4.5, and so forth.	Total Claim
4.16	Publishers Clearing House	Last 4 digits of account number	\$ 35.00
	Creditor's Name		
	382 Channel Dr.	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Port Washington NY 11050	Unliquidated	
	City State Zip Code	Disputed	
	Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?		
	No	Other. Specify Membership/Subscription	
	Yes		. 4 475 00
4.17	Sprint	Last 4 digits of account number	\$ 1,475.00
	Creditor's Name	Miles was the debt Seemed O	
	PO Box 7949	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Overland Park KS 66207	Unliquidated	
	City State Zip Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	= '		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
	community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?		
	■ No	Other. Specify Utility Bills/Cellular Service	
4.40	Yes Syncb/Amazon	Last 4 digits of account number NULL	\$ 0.00
4.18	Creditor's Name	Last 4 digits of account number NULL	Ψ_0.00
	Po Box 965015	When was the debt incurred? 2014-2016	
	Number Street		
	Talliss. Case.		
		As of the date you file, the claim is: Check all that apply.	
	Orlando FL 32896	Contingent	
		Unliquidated	
	City State Zip Code Who owes the debt? Check one.	Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
		that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offest?	Social to period of profit officining plants, and outer official debte	
	No	Other. Specify Credit Card or Credit Use	
	Yes	Guior. Specify	

Doc 1 Filed 03/22/18 Entered 03/22/18 16:04:43 Desc Main Case 18-08352 Page 27 of 67 Case Number (if known) **Document** Patricia Lynn Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

4.19	Syncb/Lowes	Last 4 digits of account number NULL	\$ <u>695.00</u>
	Creditor's Name	When was the debt incurred? 2013-2017	
	Po Box 965005	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Orlando FL 32896	Unliquidated	
Ι.	City State Zip Code	Disputed	
ľ	Who owes the debt? Check one.		
	Debtor 1 only	T (1101)P10P17/	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
[Check if this claim relates to a	that you did not report as priority claims	
١,	community debt s the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
l i	No	Other, Specify Credit Card or Credit Use	
li	Yes	Other. Specify Credit Card or Credit Use	
4.20	Syncb/Nautilus	Last 4 digits of account number NULL	\$ 0.00
1.20	Creditor's Name		
	950 Forrer Blvd	When was the debt incurred? 2015-2017	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Kettering OH 45420	Unliquidated	
l .	City State Zip Code	Disputed	
'	Who owes the debt? Check one.	bisputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
[Check if this claim relates to a	that you did not report as priority claims	
Ι.	community debt s the claim subject to offest?	Debts to pension or profit-sharing plans, and other similar debts	
li	No	Cradit Card or Cradit Llag	
li	Yes	Other. Specify Credit Card or Credit Use	
4.21	Syncb/Toysrusdc	Last 4 digits of account number NULL	\$ 3,699.00
7.21	Creditor's Name		
	Po Box 965005	When was the debt incurred? 2014-2016	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Orlando FL 32896	Unliquidated	
	City State Zip Code	Disputed	
'	Who owes the debt? Check one.	☐ Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim: □	
ļ	Debtor 1 and Debtor 2 only	☐ Student loans	
L	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a	that you did not report as priority claims	
1 .	community debt	Debts to pension or profit-sharing plans, and other similar debts	
'i	s the claim subject to offest? No	Cradit Card or Cradit Llag	
	=	Other. Specify Credit Card or Credit Use	
	Yes		

Page 28 of 67 Case Number (if known) **Document** Debtor 1 Patricia Lynn Your NONPRIORITY Unsecured Claims - Continuation Page

Last 4 digits of account number NULL \$986.00	Creditor's Name Po Box 965024 Number Street Orlando City Who owes the debt? Check one. Debtor 1 only Debtor 2 only When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured	2009-2016 is: Check all that apply. d claim: ation agreement or divorce claims plans, and other similar debts	\$ <u>986.00</u>
Po Box 965024 Number Sizest Siz	Po Box 965024 Number Street Orlando City Who owes the debt? Check one. Debtor 1 only Debtor 2 only When was the debt incurred? As of the date you file, the claim is Unliquidated Disputed Type of NONPRIORITY unsecured	d claim: ation agreement or divorce claims	
Orlando FL 32886 Oby Who owes the debt? Check one. Debtor 1 only Debtor 2 only Als least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Ordelto-Rame 120 Corporate BIMS to Debtor 1 only Debtor 1 only Debtor 2 only No No Ordelto-Rame 120 Corporate BIMS to Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 5 only Debtor 1 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 1 only Debtor 6 only Debtor 1 only Debtor 6 only Debtor 1 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only D	Orlando FL 32896 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Contingent Unliquidated Disputed Type of NONPRIORITY unsecured	d claim: ation agreement or divorce claims plans, and other similar debts	
Orlando FL 32896 Orland	Orlando FL 32896 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured	ation agreement or divorce claims g plans, and other similar debts	
City State Zp Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 on	City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured	ation agreement or divorce claims g plans, and other similar debts	
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 o	Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured	ation agreement or divorce claims g plans, and other similar debts	
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 2 only Sudent loans Debtor 4 and Debtor 2 only Debtor 5 only 1 only 1 only 1 only 2 only 3 only 3 only 3 only 4 only 2 only 3 only 3 only 4 only 2 only 3 only 3 only 4 only 3 only 4 only	Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured	ation agreement or divorce claims g plans, and other similar debts	
Debtor 2 only	Debtor 2 only Type of NONPRIORITY unsecured	ation agreement or divorce claims g plans, and other similar debts	
Debtor 1 and Debtor 2 only		ation agreement or divorce claims g plans, and other similar debts	
As least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Condition of the debtors and another Pyes Norfolik Chy State Chy Debtor 1 only Debtor 1 only At least or of the debtors and another Check if this claim relates to a community debt As of the date you din or report as priority claims Debts to pension or profits-sharing plans, and other similar debts Street As of the date you flie, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another The community debt as the claim subject to offest? No Ves State Zip Code Who oves the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debtors and another The community debt as the claim subject to offest? No Ves State Zip Code Who oves the debtor 3 only Check if this claim relates to a community debt as the claim subject to offest? No Ves State Zip Code Who was the debt incurred? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profits-sharing plans, and other similar debts Standard Types State Size Size Size Size Size Size Size Siz		claims g plans, and other similar debts	
Check if this claim relates to a community debt is the claim subject to offest? No		claims g plans, and other similar debts	
community debt s the claim subject to offest? No Check Specify Credit Card or Credit Use 4.23 Synchrony BANK Last 4 digits of account number 781.4 Last 4 digits of account number 781.4 Last 4 digits of account number 2017-2017 When was the debt incurred? 2017-2017 Norfolk VA 23502 Cry Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Al teast one of the debtors and another Check if this claim relates to a community debt as the claim subject to offest? No Yes 4.24 Synchrony BANK Last 4 digits of account number 3149 Check if this claim relates to a community debt as the claim subject to offest? No Yes 4.24 Synchrony BANK Last 4 digits of account number 3149 Corditor's Name 2365 Nothside Dr Ste 30 Number Street As of the date you file, the claim is: Check all that apply. Corditor's Name 240 No No No 10 Nervice Specify Unknown Credit Extension When was the debt incurred? 2016-2016 As of the date you file, the claim is: Check all that apply. Corditor's Name 240 No No 2016-2016 As of the date you file, the claim is: Check all that apply. Corditor's Name 240 No No 2016-2016 As of the date you file, the claim is: Check all that apply. Corditor's Name 240 No No 2016-2016 San Diego CA 92108 City Sate Zip Code Uniquidated		plans, and other similar debts	
Is the claim subject to offest? No Ves Synchrony BANK Ceditor's Name 120 Corporate Blvd Ste 1 Number Street Norfolk VA 23502 City Substance Control Cont			
Other: Specify Credit Card or Credit Use Yes		or Credit I Ica	
Yes Synchrony BANK Last 4 digits of account number 7814 \$661.00	No.		
Acad Synchrony BANK	Other, Specify	oredit ose	
Creditor's Name 120 Corporate Bivd Ste 1 Number Street Norfolk	Cynchrony DANIK	7814	\$ 661.00
Number Street Norfolk VA 23502 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 4 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt is the claim subject to offest? No Yes Synchrony BANK Creditor's Name 2365 Northside Dr Ste 30 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Last 4 digits of account number 3149 \$ 2016-2016 When was the debt incurred? 2016-2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Norfolk	120 Corporate Blvd Ste 1 When was the debt incurred?	2017-2017	
Norfolk VA 23502 City Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.24 Synchrony BANK Creditor's Name 2365 Northside Dr Ste 30 Number Street San Diego CA 92108 City State Zip Code Who owes the debt? Check one. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Contingent Unknown Credit Extension When was the debt incurred? 3149 \$2,136.00 When was the debt incurred? 2016-2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Number Street		
Norfolk VA 23502 City Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.24 Synchrony BANK Creditor's Name 2365 Northside Dr Ste 30 Number Street San Diego CA 92108 City State Zip Code Who owes the debt? Check one. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Contingent Unknown Credit Extension When was the debt incurred? 3149 \$2,136.00 When was the debt incurred? 2016-2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	As of the date you file, the claim is	is: Check all that annly	
Norfolk VA 23502 City State Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Ves Vsynchrony BANK Creditor's Name 2365 Northside Dr Ste 30 Number Street As of the date you file, the claim is: Check all that apply. City Who owes the debt? Check one. Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Unknown Credit Extension **Sundamona**		S. Oncok all that apply.	
City State Zip Code Who owes the debt? Check one. Disputed Disputed Type of NONPRIORITY unsecured claim: Student loans Student loans Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt is the claim subject to offest? No Other. Specify Unknown Credit Extension Debts of pension or profit-sharing plans, and other similar debts Last 4 digits of account number 3149 San Diego CA 92108 City State Zip Code Who owes the debt? Check one. Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Last 4 digits of account number 3149 \$ 2,136.00 When was the debt incurred? 2016-2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Norfolk VA 23502		
Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Ves Synchrony BANK Creditor's Name 2365 Northside Dr Ste 30 Number Street San Diego CA 92108 City Who owes the debt? Check one. Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Tother. Specify Unknown Credit Extension Ves Unknown Credit Extension Vene was the debt incurred? 2016-2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	City State Zip Code		
Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.24 Synchrony BANK Creditor's Name 2365 Northside Dr Ste 30 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unkliquidated Who owes the debt? Check one.	Who owes the debt? Check one.		
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 2365 Northside Dr Steet Street As of the date you file, the claim is: Check all that apply. Contingent Con	Debtor 1 only		
At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offest? No Yes 4.24 Synchrony BANK Creditor's Name 2365 Northside Dr Ste 30 Number Street San Diego CtA 92108 City State Zip Code Who owes the debt? Check one. Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Last 4 digits of account number 3149 State Zip Code When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Debtor 2 only Type of NONPRIORITY unsecured	d claim:	
Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts	Debtor 1 and Debtor 2 only		
Community debt Is the claim subject to offest? No Yes 4.24 Synchrony BANK Creditor's Name 2365 Northside Dr Ste 30 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	At least one of the debtors and another Obligations arising out of a separa	ation agreement or divorce	
Community debt Is the claim subject to offest? No Yes 4.24 Synchrony BANK Creditor's Name 2365 Northside Dr Ste 30 Number Street San Diego City State Zip Code Who owes the debt? Check one. Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or pension of pension or p	Check if this claim relates to a that you did not report as priority of	claims	
No Yes Other. Specify Unknown Credit Extension		plans, and other similar debts	
Yes 4.24 Synchrony BANK Creditor's Name 2365 Northside Dr Ste 30 Number Street As of the date you file, the claim is: Check all that apply. City State Zip Code Who owes the debt? Check one. City State Zip Code Disputed Sinch Street Continuent Street Street Street Street Unliquidated Disputed	Is the claim subject to offest?		
4.24 Synchrony BANK Creditor's Name 2365 Northside Dr Ste 30 Number Street San Diego CA 92108 City State Zip Code Who owes the debt? Check one. Last 4 digits of account number 3149 When was the debt incurred? 2016-2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	No Other. Specify Unknown Cree	edit Extension	
Creditor's Name 2365 Northside Dr Ste 30 Number Street Mas of the date you file, the claim is: Check all that apply. San Diego City State Zip Code Who owes the debt? Check one. When was the debt incurred? 2016-2016 As of the date you file, the claim is: Check all that apply. Unliquidated Disputed			
2365 Northside Dr Ste 30 Number Street San Diego CA 92108 City State Zip Code Who owes the debt? Check one. When was the debt incurred? 2016-2016 As of the date you file, the claim is: Check all that apply. Unliquidated Disputed	Synchrony BANK Last 4 digits of account number _	3149	\$ <u>2,136.00</u>
Number Street San Diego CA 92108 City State Zip Code Who owes the debt? Check one. As of the date you file, the claim is: Check all that apply. Unliquidated Disputed		2016-2016	
San Diego CA 92108 City State Zip Code Who owes the debt? Check one. As of the date you file, the claim is: Check all that apply. Unliquidated Disputed	2365 Northside Dr Ste 30 When was the debt incurred?	2010-2010	
San Diego CA 92108 City State Zip Code Who owes the debt? Check one. Contingent Unliquidated Disputed	Number Street		
San Diego CA 92108 City State Zip Code Disputed Unliquidated Disputed	As of the date you file, the claim is	is: Check all that apply.	
City State Zip Code Who owes the debt? Check one. Unliquidated Disputed			
City State Zip Code Who owes the debt? Check one.	San Diego CA 92108 Unliquidated		
The shoe all destriction	City State Zip Code		
	Debtor 1 only		
		d atolana	
Debtor 2 only Type of NONPRIORITY unsecured claim:		a ciaim:	
Debtor 1 and Debtor 2 only Student loans			
At least one of the debtors and another		-	
Check if this claim relates to a that you did not report as priority claims			
community debt Debts to pension or profit-sharing plans, and other similar debts	— 1 1	plans, and other similar debts	
Is the claim subject to offest?	■	odit Evtonoion	
No Other Specify Unknown Credit Extension	Other. Specify Unknown Cree	CUIL LAIGHSIUH	

Case 18-08352 Filed 03/22/18 Entered 03/22/18 16:04:43 Desc Main Doc 1 Page 29 of 67 Case Number (if known) **Document** Patricia Lynn Debtor 1 First Name 3958 \$ 2,096.00 Webbank 4.25 Last 4 digits of account number Creditor's Name 2016-2016 2365 Northside Dr Ste 30 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent San Diego CA 92108 Unliquidated City
Who owes the debt? Check one. State Zip Code Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt

Other. Specify ____ Unknown Credit Extension

Is the claim subject to offest?

No

Case 18-08352

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Patricia Debtor 1

Lynn

Document

Page 30 of 67 Case Number (if known)

Part 3:	
rait oi	

ist Others to Be Notified for a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankrup example, if a collection agency is trying to collect from you for a debt you, then list the collection agency here. Similarly, if you have more than additional creditors here. If you do not have additional persons to be not additional persons.	ou owe to someone else, list the origin one creditor for any of the debts that y	al creditor in Parts 1 or ou listed in Parts 1 or 2, list the
Sequium Asset Solutions, LLC, Bankruptcy Dept.	On which entry in Part 1 or Part 2	list the original creditor?
Name 1130 Northchase Parkway, #150	Line 8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
Marietta GA 30067	Last 4 digits of account number	<u>5637</u>
City State Zip Code		
Lake County Clerk, 17 SC 2994	On which entry in Part 1 or Part 2	list the original creditor?
Name 18 N. County St. Rm 101	Line 9 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
Waukegan IL 60085	Land districts of a constant control	8227
City State Zip Code	Last 4 digits of account number	<u> </u>
Blitt and Gaines, PC, Bankruptcy Dept.	On which entry in Part 1 or Part 2	list the original creditor?
Name 661 Glenn Ave.	Line ⁹ of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street	, ,	Part 2: Creditors with Nonpriority Unsecured Claims
Wheeling IL 60090	Last 4 digits of account number	8227
City State Zip Code		
Van RU Credit Corporation, Bankruptcy Dept.	On which entry in Part 1 or Part 2	list the original creditor?
Name 4839 N Elston Ave.	Line 10 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
Chicago IL 60630	Look 4 digite of account number	
City State Zip Code	Last 4 digits of account number	
North Shore Agency, Bankruptcy Dept.	On which entry in Part 1 or Part 2	list the original creditor?
Name PO Box 9205	Line 13 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
Old Bethpage NY 11804 City State Zip Code	Last 4 digits of account number	
AFNI, Bankruptcy Dept.	On which entry in Part 1 or Part 2	list the original creditor?
Name PO Box 3517	Line 14 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street	. (55	Part 2: Creditors with Nonpriority Unsecured Claims
Bloomington IL 61702	Last 4 digits of account number	
City State Zip Code		

Doc 1 Filed 03/22/18 Entered 03/22/18 16:04:43 Desc Main Case 18-08352 Page 31 of 67 Case Number (if known) Document Patricia Lynn Debtor 1 Last Name Second Round LP, Bankruptcy Dept. On which entry in Part 1 or Part 2 list the original creditor? Name PO Box 41955 Line 18 of (Check one): Part 1: Creditors with Priority Unsecured Claims

				
Number Street				Part 2: Creditors with Nonpriority Unsecured Claims
Austin	Т	TX 78704	Last 4 digits of account number _	NULL
City	State 2	Zip Code		
Second Round LP, Bankruptcy Dept.			On which entry in Part 1 or Part 2	list the original creditor?
Name PO Box 41955			Line 19 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street				Part 2: Creditors with Nonpriority Unsecured Claims
Austin	Т	 X 78704	Last 4 digits of account number _	NULL
City	State 2	Zip Code		
American Coradius Inc., Bankruptcy Dept.			On which entry in Part 1 or Part 2	list the original creditor?
Name 35A Rust Lane			Line 22 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street				Part 2: Creditors with Nonpriority Unsecured Claims
				2050
Boerne	T	X 78006	Last 4 digits of account number	3958

Debtor 1 Patricia

Lynn

Add the Amounts for Each Type of Unsecured Claim

Document

Entered 03/22/18 16:04:43 De Page 32 of 67 Number (if known)

Flori Name Middle Name

Last Na

	ounts for each type of unsecured claim.			
			Total claim	
otal claims	6a. Domestic support obligations	6a.	\$	0.00
	6b. Taxes and Certain other debts you owe the government	6b.	\$	20,617.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	20,617.00
			Total claim	
Total claims from Part 2	6f. Student loans	6f.	\$	0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i. Other. Add all other nonpriority unsecured claims.	6i.	\$	52,189.00

6j. Total. Add lines 6f through 6i.

52,189.00

Fill	l in this in	Caso 19 formation to iden		Eilad 02/22/19	Entered 03/22/18 16:04:43 3 of 67	Desc Main
De	ebtor 1	Patricia	Lynn	Sanders		
20	Jotor 1	First Name	Middle Name	Last Name		
	ebtor 2 ouse, if filing)	First Name	Middle Name	Last Name		
Ca	nited States		r the : <u>NORTHERN</u> District o	of <u>ILLINOIS</u> (State)		Check if this is an
		orm 106C				amended filing
		orm 106G	ory Contracts and			12/1
1. D	nation. If monal pages o you hav No. Cho Yes. Fill	nore space is needs, write your name eany executory eck this box and so in all of the informely each personnt, vehicle lease,	eded, copy the additional pare and case number (if known contracts or unexpired least submit this form to the court with mation below even if the contracts or company with whom you	ge, fill it out, number the ern). es? with your other schedules. Your acts or leases are listed in have the contract or lease	n are equally responsible for supplying correct ntries, and attach it to this page. On the top of an our have nothing else to report on this form. Schedule A/B: Property (Official Form 106A/B) Then state what each contract or lease is for (fruction booklet for more examples of executory co	or
	·		hom you have the contract o	or lease	State what the contract or lease	e is for
2.1						
	Name				_	
	Number	Street				
	City		State	Zip Code	-	
2.2						
	Name					
	Number	Street			-	
	City		State	Zip Code	-	
2.3						
	Name					
	Number	Street			-	
	City		State	Zip Code	-	
2.4						
	Name					
	Number	Street			-	
	City		State	Zip Code	-	
2.5						
	Name				-	
	Number	Street			-	

State Zip Code

City

Fill in this in	formation to ident	tify your case:	
Debtor 1	Patricia	Lynn	Sanders
	First Name	Middle Name	Last Name
Debtor 2	-		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for	the : <u>NORTHERN</u> District of _	ILLINOIS(State)
Case Number			_
(If known)			

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

any A	dditional Pages, write your nam	e and case number (if known). Answer e	every question.			
1. D (o you have any codebtors? (If y	rou are filing a joint case, do not list either	spouse as a code	ebtor.)		
[No.					
	Yes					
	• •	lived in a community property state or to na, Nevada, New Mexico, Puerto Rico, Te		unity property states and territories include and Wisconsin.)		
	No. Go to line 3.					
	Yes. Did your spouse, former	spouse, or legal equivalent live with you a	t the time?			
		state or territory did you live?	. Fill ir	n the name and current address of that person.		
	_					
	Name of your spouse, former spou	use or legal equivalent				
	Number Street					
	City	State	Zip Code			
Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. **Column 1: Your codebtor** **Column 2: The creditor to whom you owe the content of the						
3.1				Check all schedules that apply:		
J	Mike Wadas			Schedule D, line1		
	Name 5401 N Nordica Ave.			Schedule E/F, line		
	Number Street Chicago	IL	60656	Schedule G, line		
	City	State	Zip Code			
3.2				Schedule D, line		
	Name			Schedule E/F, line		
	Number Street			Schedule G, line		
	City	State	Zip Code			
3.3				Schedule D, line		
	Name			Schedule E/F, line		
	Number Street			Schedule G, line		
	City	State	Zip Code			

			DOGDIN C III F AU	- 33 0 0 7
Fill in this ir	formation to ident	ify your case:		
Debtor 1	Patricia	Lynn	Sanders	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
Case Numbe	r			Check if this is:
(If known)			_	An amended filing
				I =
				A supplement showing post-petition
				chapter 13 income as of the following date
fficial F	orm 106I			
o.a. i	<u> </u>			MM / DD / YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1	1: Describe Employment				
	fill in your employment		Debtor 1		Debtor 2 or non-filing spouse
a ^r	f you have more than one job, ittach a separate page with information about additional employers.	Employment status	X Employed Not employed		Employed Not employed
	nclude part-time, seasonal, or elf-employed work.	Occupation	Project Accountar	nt	
	Occupation may Include student or homemaker, if it applies.	Employers name Employers address	Power Construction 8750 W. Bryn Maw Chicago, IL 60631	r Ave. Ste. 500	
					<u>, </u>
Part 2	2: Give Details About Monthly	How long employed there?	Since 12/1/2008		
s _l	estimate monthly income as of the pouse unless you are separated. If you or your non-filing spouse have nes below. If you need more space	e more than one employer, combi	ne the information for a		, , ,
				For Debtor 1	For Debtor 2 or non-filing spouse
	List monthly gross wages, salary deductions). If not paid monthly, ca	, , ,	•	\$7,576.48	\$0.00
3. i	Estimate and list monthly overtin	ne pay.		\$0.00	\$0.00
4. (Calculate gross income. Add line	2 + line 3.		\$7,576.48	\$0.00

 Official Form 106I
 Record # 757358
 Schedule I: Your Income
 Page 1 of 2

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Debtor 1 Patricia Lynn Document Sanders Page 36 of 67
First Name Middle Name Last Name Page 36 of 67
Case Number (if known)

			For Debtor 1	For Debtor 2 or non-filing spouse
С	opy line 4 here	4.	\$7,576.48	\$0.00
. List	all payroll deductions:			
5	a. Tax, Medicare, and Social Security deductions	5a.	\$2,074.14	\$0.00
51	b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00
5	c. Voluntary contributions for retirement plans	5c.	\$453.78	\$0.00
50	d. Required repayments of retirement fund loans	5d.	\$622.26	\$0.00
5	e. Insurance	5e.	\$245.58	\$0.00
51	f. Domestic support obligations	5f.	\$0.00	\$0.00
5	g. Union dues	5g.	\$0.00	\$0.00
51	h. Other deductions. Specify: Life Insurance(D1),	5h.	\$113.40	\$0.00
Add	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$3,509.16	\$0.00
Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$4,067.32	\$0.00
List	all other income regularly received:	_		
88	a. Net income from rental property and from operating a business,			
	profession, or farm			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			
	monthly net income.	8a.	\$0.00	\$0.00
81	b. Interest and dividends	8b.	\$0.00	\$0.00
8	c. Family support payments that you, a non-filing spouse, or a	8c.	\$ 0.00	\$ 0.00
	dependent regularly receive	_		
	Include alimony, spousal support, child support, maintenance, divorce			
	settlement, and property settlement.			
80	d. Unemployment compensation	8d.	\$0.00	\$0.00
80	e. Social Security	8e	\$0.00	\$0.00
81	f. Other government assistance that you regularly receive	8f.	\$0.00	\$0.00
	Include cash assistance and the value (if known) of any non-cash			
	assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			
8	g. Pension or retirement income	8g.	\$0.00	\$0.00
81	h. Other monthly income. Specify:	8h.	\$0.00	\$0.00
. A	dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$0.00	\$0.00
	alculate monthly income. Add line 7 + line 9. dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$4,067.32 +	\$0.00
In of D	tate all other regular contributions to the expenses that you list in Schedul include contributions from an unmarried partner, members of your household, you ther friends or relatives. To not include any amounts already included in lines 2-10 or amounts that are repecify:	our depender	•	
	dd the amount in the last column of line 10 to the amount in line 11. The re Vrite that amount on the Summary of Schedules and Statistical Summary of Co		•	t applies 12
3. D	o you expect an increase or decrease within the year after you file this forn	n?		
Г	x No.			

Fill in this in	formation to identify yo	our case:				
Debtor 1	Patricia	Lynn	Sanders	Check if this is:		
	First Name	Middle Name	Last Name	An amende	•	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		ent showing post of the following d	-petition chapter 13 ate:
United States	Bankruptcy Court for the :	NORTHERN DISTRICT (OF ILLINOIS			
Case Number (If known)	г		<u> </u>	MM / DD / `	YYYY	
Official E	orm 106 l				=	2 because Debtor 2
	<u>orm 106J</u>			— maintains a	a separate house	hold.
	e J: Your Ex					12/15
-				are equally responsible for supplyi ges, write your name and case num	_	
Part 1:	Describe Your Household					
1. Is this a joi	int case?					
	Go to line 2. Does Debtor 2 live in a	aawayata hayaahald2				
L res.	No.	separate nousenoid?				
	Yes. Debtor 2 mus	st file a separate Schedu	ıle J.			
2. Do you l	nave dependents?	No No				
_	st Debtor 1 and		t this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2		100:1 111 00	t this information for ndent	Son - unemployed	23	No
	tate the dependents'			Goit - unemployed		X Yes
names.						X No
						Yes X No
						Yes
						X No
						Yes
						x No
						Yes
_	expenses include	X No				
	and your dependents?	Yes				
Part 2:	Estimate Your Ongoing M	onthly Expenses				
-		· · ·	=	n as a supplement in a Chapter 13 o	-	
the applicable		uptcy is filed. If this is a	i supplemental <i>Schedule J</i> ,	check the box at the top of the for	m and fill in	
	•	-	ance if you know the value Income (Official Form 106I.	1	Y	our expenses
	for the ground or lot.	expenses for your resid	lence. Include first mortgage	e payments and	4.	\$2,293.00
	cluded in line 4:				-	
4a. Re	eal estate taxes				4a.	\$0.00
4b. Pro	operty, homeowner's, or	renter's insurance			4b.	\$0.00
4c. Ho	ome maintenance, repair	, and upkeep expenses			4c.	\$0.00
4d. Ho	meowner's association	or condominium dues			4d.	\$0.00

Schedule J: Your Expenses

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Document Patricia Lynn

Debtor 1

Case Number (if known) _

Page 2 of 3

ebtor 1		se Number (if known)	
	First Name Middle Name Last Name		Your expenses
5.	Additional Mortgage payments for your residence, such as home equity loans	5.	\$0.0
	Utilities: 6a. Electricity, heat, natural gas	6a.	\$0.0
	6b. Water, sewer, garbage collection	6b.	\$0.0
	6c. Telephone, cell phone, internet, satellite, and cable service	6c.	\$170.0
	6d. Other. Specify:	6d.	\$ 0.0
·.	Food and housekeeping supplies	7.	\$375.0
3.	Childcare and children's education costs	8.	\$0.0
9.	Clothing, laundry, and dry cleaning	9.	\$45.0
10.	Personal care products and services	10.	\$40.0
11.	Medical and dental expenses	11.	\$130.0
12.	Transportation. Include gas, maintenance, bus or train fare.	12.	\$163.0
	Do not include car payments.		
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.0
14.	Charitable contributions and religious donations	14.	\$0.0
	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$0.0
	15b. Health insurance	15b.	\$0.0
	15c. Vehicle insurance	15c.	\$125.0
	15d. Other insurance. Specify:	15d.	\$0.0
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify:	16.	\$0.0
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$400.0
	17b. Car payments for Vehicle 2	17b.	\$0.0
	17c. Other. Specify:	17c.	\$0.0
	17d. Other. Specify:	. 17d.	\$0.0
18.	Your payments of alimony, maintenance, and support that you did not report as deducted		
	from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$0.0
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$0.0
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.	
	20a. Mortgages on other property	20a.	\$ 0.0
	20b. Real estate taxes	20b.	\$ 0.0
	20c. Property, homeowner's, or renter's insurance	20c.	\$ 0.0
	20d. Maintenance, repair, and upkeep expenses	20d.	\$ 0.0
	20e. Homeowner's association or condominium dues	20e.	\$ 0.0

Official Form 106J Record # 757358 Schedule J: Your Expenses Case 18-08352 Doc 1 Filed 03/22/18 Entered 03/22/18 16:04:43 Desc Main Document Page 39 of 67

Debtor	1 Patric	a Lynn	Sanders	Case Number (if known)		
	First Nar	ne Middle Name	Last Name			
21.	Other. S	pecify: Pet Care (\$25.00),		_	21.	\$25.00
22	Your mor	nthly expense: Add lines 4 through	21.		22.	\$3,766.00
	The resul	t is your monthly expenses.				
23.	Calculate	your monthly net income.				
	23a.	Copy line 12 (your comibined mor	thly income) from Schedule I.		23a.	\$4,067.32
	23b.	Copy your monthly expenses from	line 22 above.		23b. -	\$3,766.00
	23c.	Subtract your monthly expenses fi	om your monthly income.		23c.	\$301.32
		The result is your monthly net inco	ome.			
24.	Do you e	xpect an increase or decrease in y	our expenses within the year after you	file this form?		
	For exam	ple, do you expect to finish paying fo	or your car loan within the year or do you	expect your		
	mortgage	payment to increase or decrease be	ecause of a modification to the terms of y	our mortgage?		
	X No					
	Yes.	Explain Here:				

 Official Form 106J
 Record #
 757358
 Schedule J: Your Expenses
 Page 3 of 3

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT at	n attorney to help you fill out bankruptcy forms?
No	
Yes. Name of Person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read to correct.	he summary and schedules filed with this declaration and that they are true and
🗶 /s/ Patricia Lynn Sanders	×
Signature of Debtor 1	Signature of Debtor 2
Date 03/19/2018	Date
MM / DD / YYYY	MM / DD / YYYY

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Fill in this information to identify your case:				
Patricia First Name	Lynn Middle Name	Sanders Last Name		
First Name	Middle Name	Last Name		
	r the : <u>NORTHERN</u> District of	ILLINOIS (State)		
Γ				
,	Patricia First Name First Name Bankruptcy Court for	Patricia Lynn First Name Middle Name First Name Middle Name Bankruptcy Court for the :NORTHERN District of		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

numb	er (if known). Answer every question.		, ,	
D	til: Give Details About Your Marital Status and Where Yo	Live d Badana		
	Give Details About Your Marital Status and Where Yo What is your current marital status?	u Lived Before		
01.	_			
	Married ■			
	Not married			
02	During the last 3 years, have you lived anywhere other than	n where you live now	v?	
	No.	,		
	Yes. List all of the places you lived in the last 3 years. Do	not include where yo	ou live now.	
	Debtor 1	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
03	Nithin the last 8 years, did you ever live with a spouse or le		community property state or territory? (Community	
	property states and territories include Arizona, California, l and Wisconsin.)	ldaho, Louisiana, Ne	vada, New Mexico, Puerto Rico, Texas, Washington,	
	No.			
	Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).		
Pa	Explain the Sources of Your Income			
	•			

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Debtor 1 Patricia Lynn Sanders Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$11,245 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$90,917 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2017) Operating a business Operating a business Wages, commissions, \$78,624 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) **Gambling Winnings** \$1,211 For last calendar year: (January 1 to December 31, 2016) List Certain Payments You Made Before You Filed for Bankruptcy

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ebtor 1	Patricia	Lynn	Sanders	_	Case Number (if known)	
	First Name	Middle Name	Last Name			
06 A	re either Debtor 1's or	Debtor 2's debts primarily co	nsumer debts?			
	_	1 nor Debtor 2 has primarily c			ed in 11 U.S.C. § 101(8) a	as
	-	individual primarily for a person	-	• •		
	During the 90 da	ays before you filed for bankrup	otcy, did you pay any	y creditor a total of \$6,42	25* or more?	
	☐ No. Go to li	ne 7.				
	_					
	_	elow each creditor to whom you			• •	
		nt you paid that creditor. Do not		* *	_	
	• •	rt and alimony. Also, do not inc ent on 4/01/19 and every 3 yea		-	•	
	Cabjeet to adjactiii	on on home and overy o year			ato or adjustinom.	
	Yes. Debtor 1 or De	ebtor 2 or both have primarily	consumer debts.			
	During the 90	days before you filed for bankru	ıptcy, did you pay aı	ny creditor a total of \$60	00 or more?	
	☐ No. Go to li	ne 7.				
	■ Vec List he	elow each creditor to whom you	naid a total of \$600	or more and the total a	mount you paid that	
		o not include payments for dome				
		so, do not include payments to				
			Dates of	Total amount paid	Amount you still	owe Was this payment for
			payments			
	US BAN	NK HOME Mortgage 4801	Monthly	\$ 6,570	\$ 264,136	Mortgage
	_Frederic	ca St Owensboro KY				Car
	42301					Credit card
						Loan repayment
						Suppliers or vendors
						Other
07 V	Vithin 1 year before you	filed for bankruptcy, did you ma	ake a navment on a	deht vou owed anvone	who was an insider?	
		atives; any general partners; rel				al partner;
		u are an officer, director, persor a business you operate as a so				
	uch as child support an		le proprietor. 11 0.3	s.c. § 101. Iliciude payir	nents for domestic suppor	t obligations,
	No.					
_	Yes. List all payment	s to an insider.				
_			Dates of	Total amount	Amount you still	Reason for this payment
			payment	paid	owe	
08 V	/ithin 1 year hefore you	filed for bankruptcy, did you ma	ake any navments o	or transfer any property (on account of a debt that	henefited
а	n insider?			with the second	on addoding of a dobt that	oononca
lr	nclude payments on deb	ots guaranteed or cosigned by a	an insider.			
	No.					
	Yes. List all payment	s to an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
				P	J4	
Par	Identify Legal ac	ctions, Repossessions, and Fore	closures			

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Debtor	1 Patricia	Lynn	Sanders	Case Number (if I	known)	
	First Name	Middle Name	Last Name			
L		cluding personal injury case		t action, or administrative proceedir s, collection suits, paternity actions,		y
[No.					
	Yes. Fill in the detail	ils.				
			Nature of the case	Court or agency		Status of the case
	Ford Motor Credit	Company VS Patricia	Collection	Circuit Court of Lake Count	У	Pending
	Sanders					On appeal
	CASE NUMBER#	17SC2994				Concluded
		u filed for bankruptcy, was a	any of your property repossesse	ed, foreclosed, garnished, attached,	seized, or levied?	
[No. Go to line 11					
1	Yes. Fill in the infor	mation below.				
			5			
	Ford Cradit		Describe the property		Date	Value of the property \$4,500
	Ford Credit		Wages		12/15/2017-03/ 15/2018	
	<u>cos conocaro r</u>					
			Explain what happened			
			☐ Property was reposses☐ Property was foreclose			
			Property was garnished			
			Property was attached,			
	•	you filed for bankruptcy, d yment because you owed		nk or financial institution, set off a	any amounts from	your accounts
	No. Go to line 11					
ŀi	Yes. Fill in the infor	mation below.				
				ossession of an assignee for the l	penefit of creditors	s, a
	No.	er, a custodian, or another	official?			
_	Yes.					
	List Cortain Gi	fts and Contributions				
			id you give any gifts with a tota	al value of more than \$600 per per	son?	
	No.	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
i	Yes. Fill in the detail	ils for each gift.				
1 7	_		id you give any gifts or contrib	outions with a total value of more t	han \$600 to any c	harity?
	No.					
	Yes. Fill in the detail	ils for each gift.				
Par	List Certain Lo	sses				

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Debtor 1	Patricia	Lynn	Sanders	Case Number (if	known)	
	First Name	Middle Name	Last Name			
	ithin 1 year before y ambling?	ou filed for bankruptcy or	since you filed for bankruptcy, did you	ı lose anything because of	f theft, fire, other di	saster, or
] No.					
	Yes. Fill in the deta	ails for each gift.				
	Describe the properthe loss occurred	erty you lost and how	Describe any insurance coverage include the amount that insurance		Date of your loss	Value of property lost
	Gambling		None		From	\$14,000
	Rivers Casino				2/2017-2/14/20 18	
Part	7. List Certain P	ayments or Transfers				
			d you or anyone else acting on your b	ehalf pay or transfer any p	roperty to anyone y	ou ou
		ing bankruptcy or preparing, bankruptcy petition prepa	ng a bankruptcy petition? arers, or credit counseling agencies fo	or services required in you	r bankruptcy.	
_] No.	, , , , , , , ,	,			
	Yes. Fill in the deta	ails				
	Party Contact Info		Description and value of any pro	perty transferred	Date payment or transfer	Amount of payment
	Geraci Law L.L.C)				Payment/Value:
	55 E. Monroe Str	eet #3400				\$4,000.00: \$0.00 paid prior to filing,
	Chicago,IL 60603	3				balance to be paid
						through the plan.
	Party Contact Info		Description and value of any pro	perty transferred	Date payment or transfer	Amount of payment
	Hananwill Credit	Counseling	Credit Counseling Services		2017	\$25.00
	115 N. Cross St.	<u></u>				7=0.00
	Robinson, IL 624	.54				
			d you or anyone else acting on your b r to make payments to your creditors?		roperty to anyone v	vho
-		syment or transfer that you				
	No.					
	Yes. Fill in the deta	ails.				
tra Ind	ansferred in the ordi	inary course of your busing transfers and transfers ma	lid you sell, trade, or otherwise transfe ess or financial affairs? ide as security (such as the granting o already listed on this statement.			
_	-	mat you nave	and say notice on any oldfording			
	No.	aile for each aift				
L	Yes. Fill in the deta	alls for each giπ.				

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Debtor 1	Patricia	Lynn	Sanders	Case	Number (if known)	
	First Name	Middle Name	Last Name			
		ou filed for bankruptcy often called asset-prote	, did you transfer any property ection devices.)	to a self-settled trust or	similar device of which	you are a
	No.					
	Yes. Fill in the details	s for each gift.				
Part	8: List Certain Fina	ncial Accounts, Instrume	ents, Safe Deposit Boxes, and St	orage Units		
so Inc	ld, moved, or transfer clude checking, savin	red? gs, money market, or o	vere any financial accounts or ther financial accounts; certific	cates of deposit; shares in	-	
ho	uses, pension funds,	cooperatives, associat	ions, and other financial institu	utions.		
∣ F	Yes. Fill in the details	S.				
	•	La	est 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	you now have, or did sh, or other valuables	-	r before you filed for bankrupto	cy, any safe deposit box c	or other depository for	securities,
	No. Yes. Fill in the details	3.				
			ho else had access to it?	Describe the conte	nts	Do you still have it?
22 Ha	eve you stored proper	ty in a storage unit or p	lace other than your home witl	hin 1 year before you filed	for bankruptcy?	
	No.					
	Yes. Fill in the details	3.				
		W	ho else has or had access to it?	Describe the conte	nts	Do you still have it?
	Identify Branarts	/ You Hold or Control for	Samaona Elsa			
Part						
	o you hold or control a r someone.	any property that some	one else owns? Include any pr	operty you borrowed fron	n, are storing for, or ho	old in trust
_] No.					
	Yes. Fill in the details	S.				
	•	W	here is the property?	Describe the prope	erty	Value
	Mike Wadas	Sa	me as Debtor	17 Honda Civic		\$18,000
	5401 N Nordica Ave.					
	Chicago, IL 60656			_		
				_		
Part '	Give Details Abo	out Environmental Informa	ation			
For the	e purpose of Part 10, t	he following definitions	apply:			
		•	local statute or regulation con-	• • • • • • • • • • • • • • • • • • • •	•	
			cleanup of these substances,		,	
		facility, or property as e, or utilize it, including	defined under any environmer disposal sites.	ntal law, whether you now	own, operate, or utiliz	e
			mental law defines as a hazard minant, or similar term.	lous waste, hazardous su	bstance, toxic	
Report	all notices, releases,	and proceedings that y	ou know about, regardless of	when they occurred.		

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In	re								
Patricia Lynn Sanders / Debtor						Case No:			
							Chapter:	Chapter 13	
			DISCLOS	URE OF COMP	ENSATION O	F ATTORNEY	FOR DEE	BTOR	
	npensation p	aid to me v	. § 329(a) and Fed. Ba within one year before on behalf of the debto	ankr. P. 2016(b), I the filing of the p	certify that I a	im the attorney f cruptcy, or agree	or the aboved to be paid	e named debtor(s d to me, for service	ces
	For legal	services, I l	nave agreed to accept		\$4,000.00				
	Prior to th	ne filing of	this statement I have r	eceived	\$0.00				
	Balance I	Due		=	\$4,000.00				
2.	The source	e of the con	npensation paid to me	was:					
	Deb	tor(s)	Other: (specif	fy)					
3.	The source	e of compe	nsation to be paid to m	ne is:					
	De	btor(s)	Other: (specif	fv)					
4.		e not agreed law firm.	d to share the above-d		ation with any	other person un	less they ar	e members and a	ssociates
		law firm.	share the above-discle A copy of the agreem						
5.	In return for case, inclu		e-disclosed fee, I have	e agreed to render	legal service f	or all aspects of	the bankru	ptcy	
			lebtor' s financial situa	ation, and renderi	ng advice to the	e debtor in deter	mining who	ether to file a peti	ition in
		ruptcy;	filing of any natition	aahadulaa atotom	anta of officer	and plan which s		simo de	
	-		filing of any petition, of the debtor at the me			-			eof:
	с. керк	Schallon	if the debtor at the me	cting of cicultors	and comminan	ion nearing, and	any adjourn	ned hearings thei	,
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following service:								
			ify that the foregoing to me for representation	is a complete stat	-	greement or arra	-	or	
		Date:	03/22/2018	/s/	Wylie W Mok				
		Date			nature of Attor		_		
				Ge	eraci Law L.L.	C			

Page 1 of 1 Record # 757358

Name of law firm

Case 18-08352 Doc 1 File **General 21/18 v** LED to Fred 03/22/18 16:04:43

National HeadquaDens பிரைட்டு Monroe \$ இரு #3400 6 hi இரை, IL 60603

www.infotapes.com

1-866-925-1313

Consultation Attorney: MOK



Desc Main

Record #: 757-358

Date: 12/20/2017

Representing Geraci Law L.L.C.

1

Attorney Retainer Agreement Chapter 13 The undersigned hires Geraci Law L.L.C. for representation in a Chapter 13 bankruptcy. I have signed and received a copy of any "Court Approved Retention Agreement" (CARA) or "Rights and Responsibilities" (RR) between Chapter 13 Debtors and their Attorneys" Any terms that conflict with it are null and void. I agree to comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be \$ or the fee stated in the CARA or RR if applicable. I have been advised of my Chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than 1 attorney or paralegal will work on my case. I will use CLIENT CORNER and read all material on it and the Geraci Law Website. x ______ FEES: This does NOT INCLUDE court filing cost of \$310, credit counseling or financial management classes. Any amount not paid by me prior to the case being filed shall be paid ahead of creditors through the Chapter 13 Trustee. The CARA fee is a flat fee, but my attorneys may apply to the court for additional fees based on the following hourly rates: Attorney-\$275/hr; Senior Attorney-\$375/hr; Supervising Attorney-\$450/hr; Paralegal-\$85/hr; Senior Paralegal-\$150/hr. if allowed by the CARA or court order, such as excessive work, motions, evidentiary hearings, adversary proceedings or appeals. Fees are "flat fees" and "advance payment retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. I can choose to pay on an hourly basis, but flat fee usually results in me paying less. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will refund unearned fees. If I close my file, my case is dismissed or breach this contract I agree to pay for the work done. In Wisconsin, I can submit fee disputes to binding arbitration within 30 days with the Wisconsin Lawyers fund for Client Protection(c/o State Bar of Wisconsin, P.O. Box 7158, Madison, WI 53707-7158) I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed. Attorney fees and costs get paid before my creditors before mortgage arrears, and vehicles scheduled to be paid in the plan, start getting paid. Vehicles may be scheduled to get a small payment to cover depreciation each month, like \$15-100, until attorney fees are paid, then the vehicle gets larger payments, so the vehicle is paid in about the same time as it would be if the attorney fees were not first. RESULT: if I fail to complete the plan, I may epd up paying my attorney but not as much on my vehicle and mortgage arrears and other creditors, so I will to do my best to complete the plan. Injury or other claims or property I now have or acquire after filing Chapter 13, I must disclose to Geraci law and the Chapter 13 trustee and to the Bankruptcy Court and my creditors, in a filed amendment and obtain authority to keep them or pay those claims to the Trustee. PLAN: My estimated payment is \$ 300 per month for 60 months based on the information I have provided, including income, expenses, assets and debts. The payment or length may need to be increased for all or part of the plan term. The Court, Chapter 13 Trustee or creditors could object to my proposed Chapter 13 payment, which may cause it to increase. I agree to read my petition and plan and study it before signing it so I know what is included, INCLUDING what debts, assets property and exemptions I am claiming, and to make full disclosure to every question TAX REFUNDS or other income during plan: I will send my IRS and state tax returns to my attorney or the Trustee each year. I will turn over refunds, additional income or assets to the Trustee unless I am already paying my creditors 100%. If my income or expenses change, my plan payment may have to change. If I am eligible to receive a tax refund during my Chapter 13, I may have to send it to the Chapter 13 Trustee unless I am specifically advised that I do not need to. If I receive any significant sums of money other than through employment, including but not limited to life insurance proceeds, workers compensation award, personal injury or other court settlement, I MUST notify my attorney immediately and I may have to pay some or all of the funds into my Chapter 13 plan. I will make sure if I get INJURED or get A CLAIM after filing I WILL DISCLOSE IT BY AMENDING MY CASE Plan payment includes all debts I list, unless plan states otherwise: I may be paying some creditors directly. My plan payment does NOT include include future mortgage, rent, condo fees and support payments; criminal fines/court fees; rent/lease arrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the case is filed, including any taxes or HOA fees as long as the property is in my name; other Student loans: are usually NEVER paid 100% in a Chapter 13, so my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so I have been told about this and I will deal with my student loans myself directly Debts not discharged if not paid in full: student loans; educational debts; tax debt interest; unfiled or late filed tax debts; undisclosed debts support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge. Our Representation is limited to Bankruptcy Court until Discharge or case closing of this bankruptcy. We do not represent you in state court, or in loan modifications, short sales, etc. Any delay in filing could result in judgments or liens we can't eliminate in bankrupcy. When this case is closed by the Clerk or you receive a discharge, whichever is first, our representation of you ends. Changes after this: I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and Lipust make full disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. No Discharge If I fail to remain current in a domestic support obligation (DSO), or fail to certify to the Court that I have remained current in DSO or mortgage payments, or if I fail to take my financial management class. I have received the 11 U.S.C § 527(a) disclosures on a separate sheet. (Joint Debtor)

rev 171129

Dated: 12-20-17

Patricia Sanders (Debtor)

Attorney for the Debtor(s)

Case 18-08352 Doc 1 Filed 03/22/18 Entered 03/22/18 16:04:43 Desc Main Document Page 50 of 67 CHAPTER 13 PLAN ACKNOWLEDGMENT

Datur 1 Sala							
hereby acknowledge that I have reviewed my Chapter 13 plan with my attorney, and the following are the terms being proposed:							
The total amount to be paid to the Trustee is estimated to be \$ 36,06. I will pay \$ 600 per month for at							
least (90 months. This amount may change depending on the claims filed, and the total amount I am required							
to pay will increase if I am required to turn over some or all of my tax refunds.							
Any scheduled increases are as follows: LOIK LOAR ENDING IN 6/2020 and 6/2020	}/						
These vehicles:							
2. These other secured debts:							
3. Tax debt of \$ 21, 3,00 Support debt of \$ O Mortgage arrears of \$ O							
4. Other:							
Mortgages are provided for as follows:							
Paid direct to the creditor every month Included in my plan payment N/A							
All of my debts are being paid in my Chapter 13 except the following that I am paying direct:							
The following vehicle(s): 17 Handa Civic							
My student loans PAYING IN DEFERMENT N/A							
Other:							
OTHER TERMS							
I understand that my attorneys' fees will be paid in full before my other creditors and if I fail to make							
my payments and my case is dismissed or converted before those fees are paid, any secured creditors will not							
have been paid as much as they may have otherwise been paid, which may prevent me from keeping the collateral if my case is dismissed or converted.							
I understand my plan payments start with my first paycheck after filing. If the payment is not deducted							
From my check, I <u>must</u> set it aside and send it to the Trustee.							
I <u>must</u> pay the Trustee any non-exempt proceeds I receive from any cause of action.							
I <u>will</u> notify my attorneys if I am injured, have the right to sue anyone for any reason, win the lottery, receive an inheritance, or otherwise become entitled to receive any sum of money during my bankruptcy.							
I <u>must</u> be signed up for client corner and texting so my attorneys can communicate with me.							
I <u>will</u> notify my attorneys if I move, change my phone number or change or lose my job.							
I <u>must</u> provide my attorneys copies of my tax returns every year, and <u>will turn over my tax refund to</u> the Trustee unless my attorney specifically informs me in writing that I am not required to do so.							
Other:							
X Aug nous x x							
) Date: O , , , O							
For Geraci Law: X							
Date: 5/10// }							

UNITED STATES BANKROPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1 Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



CARA Page 1 of 6

- Case 18-08352 Doc 1 Filed 03/22/18 Entered 03/22/18 16:04:43 Desc Mair 3. Personally review with the debtor and signification project petrition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 12 trustee, with particular attention to housing and vehicle payments.
- 6 Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3, Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



- Case 18-08352 Doc 1 Filed 03/22/18 Entered 03/22/18 16:04:43 Desc Mair 2. Inform the debtor that the debtor must be penetual and the spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 1 Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- Object to improper or invalid claims.
- Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307 (a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.



 $\Omega_{\mathcal{Q}}$

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2 If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:



The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



- Case 18-08352 Doc 1 Filed 03/22/18 Entered 03/22/18 16:04:43 Desc Mail (d) Any portion of the retainer that is flow earlied of a supplied of a
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E CONDUCT AND DISCHARGE

- 1 improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal sorvices provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank]



Case 18-08352 Doc 1 Filed 03/22/18 Entered 03/22/18 16:04:43 Desc Main ALLOWANCE AND PAYMENT OF STAND EXPENSES

- 1 Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$310.00

3. Before signing this agreement, the attorney ha	s received	,\$0		
toward the flat fee, leaving a balance due of \$	4,000	; and \$	310	for expenses,
leaving a balance due for the filing fee of \$	0	_		

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 12 20 17

Signed:

Debtor(s)

Co-Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.



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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Patricia Lynn Sanders / Debtor	Bankruptcy Docket #:
	Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 03/19/2018 /s/ Patricia Lynn Sanders

Patricia Lynn Sanders

X Date & Sign

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^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

B 201A (Form 201A) (11/11)

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

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Form B 201A, Notice to Consumer Debtor(s)

In re Patricia Lynn

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 03/19/2018	15/ Patricia Lynn Sanders	
	Patricia Lynn Sanders	
D. I. J. 00/00/0040	/a / NA/- 15 a NA/ BA a Is	
Dated: 03/22/2018	/s/ Wylie W Mok	
	Attorney: Wylie W Mok	

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Sanders Patricia Lvnn Case Number (if known) Debtor 1 Middle Name First Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is ∏No. excluded and administrative expenses Yes. are paid that funds will be available for distribution to unsecured creditors? 1,000-5,000 **25,001-50,000** 1-49 How many creditors do **50,001-100,000** you estimate that you 50-99 ☐ 5,001-10,000 owe? **1**00-199 **1**0,001-25,000 ☐ More than 100,000 200-999 ☐ \$1,000,001-\$10 million □\$500,000,001-\$1 billion \$0-\$50,000 19. How much do you **550,001-\$100,000** ☐ \$10,000,001-\$50 million **□**\$1,000,000,001-\$10 billion estimate your assets to be worth? \$100,001-\$500,000 □ \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$100,000,001-\$500 million ☐More than \$50 billion \$500,001-\$1 million \$0-\$50,000 \$1,000,001-\$10 million □\$500,000,001-\$1 billion 20. How much do you estimate your liabilities \$50,001-\$100,000 \$10,000,001-\$50 million ■ \$1,000,000,001-\$10 billion _to be? □ \$10,000,000,001-\$50 billion \$100,001-\$500,000 ☐ \$50,000,001-\$100 million More than \$50 billion □ \$500,001-\$1 million ☐ \$100,000,001-\$500 million Part 7: Sign Below 1 I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Executed on _: <u>3 / 19 /</u>2018 Executed on MM / DD / YYYY MM / DD / YYYY

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Filkin this in	formation to ident	fy your case:		<u> </u>
Debtor 1	Patricia	Lynn	Sanders	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	the : <u>NORTHERN</u> District of	ILLINOIS (State)	
Case Number (If known)	r		(Galio)	

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an	attorney to help you fill out bankruptcy forms?
No Yes. Name of Person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read th correct.	e summary and schedules filed with this declaration and that they are true and
Signature of Debtor 1	Signature of Debtor 2
Date : 3 /19 /2018 MM / DD / YYYY	Date

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ebtor 1	Patricia	Lynn	Sanders	Case Number (if known)					
	First Name	Middle Name	Last Name	NOONALIININ NOONA					
24 Ha	s any government	al unit notified you that you m	ay be liable or potentially liable	e under or in violation of an environmental law?					
	No.								
	Yes. Fill in the det	ails.							
		Gover	nmental unit	Environmental law, If you know it Date of notice					
25 U.	ve veu petified an	y governmental unit of any rel	ease of hazardous material?						
_	•	y governmental tills of any for	east of mazardous materials						
_	No.								
ᆫ	Yes. Fill in the det		nmental unit	Environmental law, if you know it Date of notice					
			intenta dun						
26 H a	ive you been a par	ty in any judicial or administra	ative proceeding under any env	vironmental law? Include settlements and orders.					
	No.								
	Yes. Fill in the det	tails.							
(85- 781		Court	or agency	Nature of the case Status of the case					
Su _s Ve									
Part	Give Details	About Your Business or Connec	tions to Any Business						
27 W	ithin 4 years befor	e you filed for bankruptcy, did	you own a business or have a	ny of the following connections to any business?					
	A sole proprie	etor or self-employed in a trad	e, profession, or other activity	, either full-time or part-time					
- 12 - 12	A member of	a limited liability company (Ll	.C) or limited liability partnersh	nip (LLP)					
4 ; 12	A partner in a	partnership							
	An officer, di	rector, or managing executive	of a corporation						
.50	An owner of at least 5% of the voting or equity securities of a corporation								
	No. None of the above applies. Go to Part 12.								
Ē	Yes. Check all that apply above and fill in the details below for each business.								
	-								
28 W	ithin 2 years befor	e you filed for bankruptcy, dic	you give a financial statemen	t to anyone about your business? Include all financial					
		rs, or other parties.							
	No.								
Ε	Yes. Fill in the de	etails.							
		Date is	sued						
Part '	Sign Below								
		us on this Statement of Figure	nial Affairs and any attachment	s, and I declare under penalty of perjury that the					
ans	wers are true and	correct. I understand that mal	king a false statement, conceal	ing property, or obtaining money or property by fraud					
in c	onnection with a b	oankruptcy case can result in	fines up to \$250,000, or impris	onment for up to 20 years, or both.					
18	U.S.C. §§ 152, 1341	1, 1519, and 35/1.							
		_							
4	Catel .	Side	×						
3	Signature of Deb	otor 1	Signature of	of Debtor 2					
Ş									
	Date <u>3 / / :</u>		Date						
	MM / DD	/ DD / YYYY							
	8.7	511 of the Resident Act (OEE -1-1 Forms 407)?							
Dic	you attach additio	ou attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?							
	No								
Ĺ	Yes		•						
	1	4n may agreeme who is mot	attorney to help you fill out b	ankruntev forms?					
Dic	ı you pay or agree	to pay someone who is not al	i accordey to neip you im out b	annapay Iorina:					
ê —	No								
	Yes. Name of pe	rson		Attach the Bankruptcy Petition Preparer's Notice,					
				Declaration, and Signature (Official Form 119).					

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DISCLAIMER Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entity in connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signers and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

 (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt.
 b. Failure to keep books and records documenting your financial affairs.
 c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay.
 d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others
 e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy.
 f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANCE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK_& MAKE SURE OUR PETITION IS ACCURATE!!!!

Dated: 3 /19 /2018 () Laborates

Patricia Lynn Sanders

X Date & Sign

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Patricia Lynn Sanders / Debtor

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

⊕ Dated: <u>3 / 19 /</u>2018

The Dides

Patricia Lynn Sanders

X Date & Sign

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Part 4:

Official Form 122C-1

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Patricia Lynn Sanders

Date: 3 /19 /2018

If you checked line 17a, do NOT fill out or file Form 122C-2.

if you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Debtor 1	Patricia	Lynn	Sanders	Case Number (if known)
	First Name	Middle Name	Last Name	
Part 4:	Sign Below	,		
	By cianing here	I declare under penalty of periun/ th	at the information on this st	atement and in any attachments is true and correct.
(A) colorand	by signing note	, receive under penalty or perjory an	at the information on the or	
	Later	Dodu		
	N. T.	Patricia Lynn Sanders		
	7	-		
	Date: Date	ed: 3 /19 /2018		
The state of the s	Date. Date	ed. <u> </u>		

Form B 201A, Notice to Consumer Debtor(s)

In re Patricia Lynn Sanders / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 3 / 19 /2018

Patricia Lynn Sanders

X Date & Sign

Dated: _____/ [

Attorney: Wylie W Mok

lecord# 757358

Form B 201A, Notice to Consumer Debtor(s)

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